□ Declaration

Submitted

with Initial Filing

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Att rney Dock t Numb r MAIR-101 DECLARATION FOR UTILITY OR **First Named Inventor** Mair, John F. **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION Application Number (37 CFR 1.63) Filing Date December 31, 2003 ☐ Declaration Group Art Unit Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) Examiner Name

					•		
As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Offset Router Fl	ush Cutting Base						
the specification of which is attached hereto OR	(/ rue	e of the Invention)					
was filed on (MM/D	was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	py Attached?		
(9)		(MMDD/) 11.					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
	I	·	application(s) list	ed below.			
Application Number	(s) Filing Date	e (MM/DD/YYYY)	numbe supple	onal provisional ers are listed on mental priority of BB/02B attached	a` data sheet		

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Additional inventors are being named on the

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent **Parent Filing Date Parent Patent Number** Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto. As a named inventor, I hereby appoint the following registered practioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number Place Customer OR Number Bar Code X Registered practitioner(s) name/registration number listed below Label here Registration Registration Name Name Number Number Thomas W. Cook 38,849 Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number OR X Correspondence address below or Bar Code Label Name Thomas W. Cook P.O. Box 1989 **Address** 3030 Bridgeway, Suite 425-430 **Address** Sausalito 94965 City State ZIP Telephone 415-339-8550 415-339-8555 Country Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: (if any)) (first and middle Family Name or Surname Mair John F. Inventor's Date Signature Sa⁄usalito US Residence: City Country Citizenship Post Office Address 60 Suite D Liberty Ship Way Post Office Address Sausalito 94965 US City State Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

PTO/SB/09 (12-97)
Approved for use through 9/30/00. OMB 0551-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT CLAIMING SMAL	Docket Number (Optional)						
(37 CFR 1.9(f) & 1.27(b)) - INDE	MAIR-101						
Applicant XPatexitex XXXIXet ix Der:							
Application xxxxxxx No.:							
D 1 01 0000							
Filed of NSSNed: December 31	, 2003						
Title: Offset Router Flush Cutti	ing Base						
	reby state that I qualify as an independent inve es to the Patent and Trademark Office describe						
X the specification filed herew	ith with title as listed above.						
the application identified above.							
the patent identified above.							
I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1. 9(d) or a nonprofit organization under 37 CFR 1. 9(e).							
	cation to which I have assigned, granted, con- assign, grant, convey, or license any rights in						
No such person, concern, or organization exists.							
Each such person, concern, or organization is listed below.							
Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)							
entitlement to small entity status	this application or patent, notification of any cl prior to paying, or at the time of paying, the e on which status as a small entity is no longer	e earliest of the issue fee or any					
John F. Mair NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR					
orgnature of inventor	Signature of inventor S	signature of inventor					
12/31/03 Date	Date .	Pate					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.